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**AD829554**

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**FROM:**

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**AUTHORITY**

**AGO ltr 29 Apr 1980**

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DEPARTMENT OF THE ARMY  
OFFICE OF THE ADJUTANT GENERAL  
WASHINGTON, D.C. 20310



IN REPLY REFER TO

AGAM-P (M) (13 Sep 67) FOR OT RD 670322 18 September 1967

SUBJECT: Operational Report - Lessons Learned, Headquarters,  
6th Medical Center (Convalescent)

TO: SEE DISTRIBUTION

AD829554

1. Subject report is forwarded for review and evaluation by USACDC in accordance with paragraph 6f, AR 1-19 and by USCOMARO in accordance with paragraph 6c and d, AR 1-19. Evaluations and corrective actions should be reported to ACSFOR OT within 90 days of receipt of covering letter.
2. Information contained in this report is provided to insure appropriate benefits in the future from Lessons Learned during current operations, and may be adapted for use in developing training material.

BY ORDER OF THE SECRETARY OF THE ARMY:

*Kenneth G. Wickham*

KENNETH G. WICKHAM  
Major General, USA  
The Adjutant General

1 Incl  
as

DISTRIBUTION:

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(Continued on page 2)

FOR OT RD  
670322

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(Wash., D.C. 20310)

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3  
DEPARTMENT OF THE ARMY  
HEADQUARTERS, 43D MEDICAL GROUP  
APO 96240

AVCA-MB-GA-01

12 May 1967

SUBJECT: Operational Report - Lessons Learned for Period Ending  
30 April 1967 (RCS CSFOR-65)

THRU: Commanding Officer  
44th Medical Brigade  
ATTN: AVCA-MB-PO  
APO 96307

TO: Assistant Chief of Staff for Force Development  
Department of the Army  
Washington, D. C. 20310

1. Forwarded is the Operational Report - Lessons Learned for the  
6th Medical Center (Conv) for the period ending 30 April 1967.

2. This unit has made considerable progress during the period in  
improving its physical plant and facilities for recreational activities  
of both assigned personnel and patients.

*Enrico D. Carrasco*

ENRICO D. CARRASCO  
COL, MC  
Commanding

ACSFOR-RD File  
670322

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HEADQUARTERS  
6TH MEDICAL CENTER (CONVALESCENT)  
APO 96377

AVCA-MB-GA-IC

4 May 1967

SUBJECT: Operational Report on Lessons Learned for Quarterly Period Ending 30 April 1967 (RCS CSFOR-65)

TO: Commanding Officer  
43d Medical Group  
APO 96240

#### Section I. Significant Organizational Activities

1. The consolidation of personnel activities at the 6th Medical Center (Convalescent) for all units subordinate to the 43d Medical Group in the Cam Rahn Bay Area was accomplished 1 March 1967. This consolidation of personnel activities in one location has already shown evidence of a significant increase in the quality and efficiency of personnel work. It has also reduced the number of specialists normally required for proper management of personnel records and reports. The total consolidated strength of the personnel section is currently 16. The total assigned strength of this command as of 27 April 1967 was 329, of which 277 were present for duty. For a breakdown of critical MOS shortages refer to Inclosure 1. On 28 March 1967 MTOE (8-590E) was submitted to 44th Medical Brigade, expanding the operational needs of the Center in keeping with the expanded mission of the Center. The increase or difference between the original TOME and the MTOE was mainly in enlisted personnel for the laboratory, special services section, mail room, service section and nursing section. The revised organizational chart of the Center is included as Inclosure 2.

2. During this report period a total of 2,677 patients were admitted to the Center while there were 2,318 dispositions. Average length of patient stay was 27 days. For a detailed breakdown during the period refer to Inclosure 3.

3. Two Chaplains, one Catholic and one Protestant, are assigned to this unit to conduct all activities expected of military Chaplains. Each Chaplain has an enlisted assistant. Average Sunday Mass attendance was 125; average weekday attendance was 8. Protestant religious services held twice every Sunday, and once during the week had an average total attendance of 100. Patients account for two-thirds of these attendance figures. Improvements in April were recently made to provide adequate office space for

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670322

AVCMB-GA-1C

4 May 1967

SUBJECT: Operational Report on Lessons Learned for Quarterly Period Ending 30 April 1967 (RCS CSFOR-55)

Chaplains. Metal folding chairs are currently being used in lieu of pews. These have no kneelers. On order through supply channels are chair-kneelers which, if they are sent, will solve this problem.

A. During the report period a full-time assigned training NCO prepared and supervised the training program. A file was prepared and classes were taught on training subjects. An additional duty was reenlistment NCO. Liaison visits were established with 43d Group headquarters.

B. The surgical section experienced a heavy patient load during the report period as evidenced by statistics contained in Inclosure 4. A scheduled appointment system was set up for the clinic. A scheduled Surgical Ward Rounds is held weekly attended by both surgeons, physical therapist, surgical nurse and NCOIC of surgery. Surgical consultation service has been extended to the Cam Ranh area. An MAT service has been added with two clinics held weekly at the 6th Medical Center.

C. Medical supplies were being received on time and in sufficient quantities during this time period. Re-Order points were established on approximately 70% of Center stocks, and Order and Shipping Time showed a rapid decline during the past 40 days. Excellent cooperation is being received from the 32nd Medical Depot on all Medical Supply matters. In the area of Non-Medical supplies, extensive Order and Shipping times are being encountered. MRO's and requisitions are being lost at Depot level, and status information is hard to obtain. Transportation has presented quite a problem during this quarter. Present TDS allows for five (5) cargo carrying 2½ ton trucks. A modified TDS has been submitted requesting five (5) more, which are presently on hand. Due to the non-availability of parts, the deadline rate fluctuates between 40 and 50%.

D. In the area of recreational activities significant advances have been observed. Scheduled stage shows, movies, opening of air-conditioned Special Services Library, and utilization of the RMS station enhanced the program (Inclosure 5). A new enlarged post exchange facility opened late in March allowing for a greater expansion in variety and amount of merchandise stocked (Inclosure 6). Postal operations also experienced an increase in volume and efficiency (Inclosure 7).

E. Officers of this command began a self-help program during this period to upgrade their Officers Club. Renovation of the interior is now approximately 75% completed.

F. Installation of three (3) new diesel ovens and eight (8) new stoves has been completed. They should be tested and ready for operation within a week. This installation will effect the phasing out of the field ranges now in use.

AVCA-1B-GA-1C

4 May 1967

SUBJECT: Operational Report on Lessons Learned for quarterly period ending 30 April 1967 (KCS Corun-65)

## Section II.

### Part I. Lessons Learned

#### Item: Manufacture of pharmaceutical preparations.

**Discussion:** During the month of February, the Pharmacy moved from its temporary location in a ward type building, to the permanent site in the Dispensary building. Modifications of the original floor plans made by the Pharmacy included adding additional shelving and modifying existing shelving. The storage space of the Pharmacy was greatly enhanced by use of the linen closet immediately adjacent to the Pharmacy. Moving to the new location almost completely eliminated the sand and dust problems which formerly plagued the Pharmacy.

**Observation:** The Pharmacy is now able to manufacture many preparations, i.e., cough syrups, ointments, etc., previously prohibited because of the sand and dust problem.

#### Item: MUS training program in the medical area.

**Discussion:** The majority of individuals assigned to Nursing Service have never had experience in actual patient care. Due to the number and type of patients, they are called upon to do more than usually expected of personnel in their MUS. This is especially true in the area of medications. Most of the training is of the bedside teaching method. This places a responsibility on the medical team to continuously instruct these of the lower MUS groups. The physician, nurse and Y1C40's are daily engaged in these procedures. The lack of practical experience on the part of Y1A10's shows a need for the experience to be given prior to shipment to an overseas area.

**Observation:** The possibility that part of the original MUS training could include practical experience should be explored.

#### Item: Construction of sidewalks.

**Discussion:** The construction of sidewalks during the latter part of February has greatly facilitated the movement of patients. Prior to the construction of sidewalks each patient was required to plow through deep sand to reach any area. This caused increased fatigue in many patients already fatigued from their illnesses.

**Observation:** Easier movement now allows us to use the full capabilities of our facilities.

VC4-1B-3-1C

4 May 1967

Subj. #1: Operational Report on lessons learned for quarterly period ending 30 April 1967 (RCS CSIRK-65)

**Item:** Optimal care of patients.

**Discussion:** The Medical Section physicians are responsible for the admission, care and disposition of patients admitted to the Medical Service. They as well are the physicians in charge of the dispensary sick call for permanent party and see medical consultations referred by neighboring dispensaries. Average daily medical census for the time covered in this report ranged from 483 to 647. Average weekly admissions to this service were 140. Daily sick call included 10 to 15 patients for this same time. This considerable load of acutely ill as well as convalescing patients was handled by five physicians the entire time. Our special treatment beds (20-25) were filled at all times with patients who had serious acute medical problems ranging from new malaria injections to bacillary or amebic dysentery and fevers of undetermined origin. The situation was aggravated by the paucity of registered nurses (2-4 during the entire period in the entire hospital). Time was not available for training of corpsmen or other ancillary personnel, therefore the physician attempted to alleviate this problem by acting as his own special nurse.

**Observation:** It was clear in this report period that optimal care was frequently difficult with the large daily influx of patients as well as ward responsibilities for close to one hundred men per doctor.

Item: High wire electrical system.

**Discussion:** All buildings in the Center have recently been hooked up to the installed high wire electrical system. Removal of old wire and poles is 95% completed. The source of power for the high wire system is two 350 Kw generators and the four 100 kw generators powering the old system have been phased out.

**Observation:** Installation of the new system has eliminated maintenance of old 100 kW generators and inconvenience created by previous erratic performances.

## **Part II. Recommendations**

Nope

-1-  
ANTON L. HITZELBERGER  
ATC, Inc  
Commanding

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as

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AVCA-MB-PO (12 May 1967) 1st Ind  
SUBJECT: Operation Report - Lessons Learned for Quarterly Period  
Ending 30 April 1967 (RCS CSFOR-65)

HEADQUARTERS, 44th Medical Brigade, APO 96307, 25 May 1967

TO: Commanding General, 1st Logistical Command, ATTN: AVCA-GO-O  
APO 96307

The contents of basic document and cover letter thereto have been  
reviewed and are forwarded with the concurrence of this headquarters.

TEL: Lynx 582

1 Incl  
as

*Ray Miller*

RAY L. MILLER  
Colonel, MC  
Commanding

10

AVCA GC-O (4 May 67) 2d Ind  
SUBJECT: Operational Report for Quarterly Period Ending 30 April 1967  
(RCS CSFOR 65)

HEADQUARTERS, 1ST LOGISTICAL COMMAND, APO 96307

20 JUL 1967

TO: Deputy Commanding General, US Army Vietnam, ATTN: AVHGC-DH, APO 96307

1. The Operational Report - Lessons Learned submitted by the 6th Medical Center (Convalescent) for the quarterly period ending 30 April 1967, is forwarded.

2. Reference page 2, paragraph 6:

a. For normal replenishment requisitions from CONUS, the order ship time for Class II and IV items is 135 days if items are on hand. If items are in short supply or procurement action must be initiated the order ship time may be extended. When known, procurement lead time is considered at the time requisitioning objectives are computed. Periodically, order ship time is adjusted based on a study of requisitions submitted. Without specific information an objective evaluation of comments submitted by 6th Medical Center is very difficult to conduct. Submission of high priority requisitions for urgent authorized requirements will reduce the order ship time considerably if items are available in the supply system.

b. In an effort to improve the repair parts posture of this command, a supply technical assistance team consisting of 450 military and civilian personnel from CONUS are presently on temporary duty here in Vietnam to assist this command in updating and purifying all organizational Prescribed Load Lists, support unit's Authorized Stockage Lists and supply depot's Theater Authorized Stockage Lists. The result of the team's effort has improved the availability of repair parts at all levels within the command, and has significantly reduced the quantity of equipment nonoperational because of the lack of parts.

3. Reference page 4, 1st item. Records, this headquarters, show that the 6th Medical Center currently is authorized 6 officers and have 6 assigned in the MOS's listed. In reference to the enlisted MOS's, action should be taken by the Commanding Officer, 44th Medical Brigade to fill the shortages in so far as possible from resources within the Brigade.

4. The 6th Medical Center (Convalescent) engaged in combat service support for 89 days during the reporting period.

5. Concur with basic report as modified by indorsement. The report is considered adequate.

FOR THE COMMANDER:

*Timothy O'Hare*

*RCM*  
*100*  
*ASST*

1 Incl

ACSFOR-ND File  
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AVHGC-DST (4 May 67)                    3d Ind  
SUBJECT: Operational Report-Lessons Learned for the Period Ending  
30 April 1967 (RCS CSFOR-65) (U)

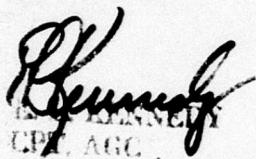
HEADQUARTERS, UNITED STATES ARMY VIETNAM, APO San Francisco 96375

TO: Commander in Chief, United States Army, Pacific, ATTN: GPOP-OT,  
APO 96558

This headquarters has reviewed the Operational Report-Lessons Learned for the period ending 30 April 1967 from Headquarters, 6th Medical Center (Convalescent) as indorsed and concurs. The report is considered adequate.

FOR THE COMMANDER:

1 Incl  
nc

  
R. KENNEDY  
CPT, AGC  
Asst Adjutant General

12

GPOP-DT(12 May 67) 4th Ind  
SUBJECT: Operational Report for the Quarterly Period Ending 30 April 1967  
from Headquarters, 43d Medical Group (RCS CSFOR-65)

HQ, US ARMY, PACIFIC, APO San Francisco 96558 18 AUG 1967

TO: Assistant Chief of Staff for Force Development, Department of the  
Army, Washington, D. C. 20310

This headquarters concurs with subject report as indorsed.

FOR THE COMMANDER IN CHIEF:



H. SNYDER  
CPT, AGC  
Asst AG

1 Incl  
nc

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**CRITICAL MOS SHORTAGES**  
**6TH MEDICAL CENTER (CONV)**

**OFFICER PERSONNEL:**

| <u>GRADE</u> | <u>MOS</u> | <u>AUTH</u> | <u>PRESENT</u> |
|--------------|------------|-------------|----------------|
| W0           | 521A       | 1           | 0              |
| 1TC          | 3129       | 2           | 1              |
| MAJ          | 3139       | 2           | 0              |
| MAJ          | 3153       | 1           | 0              |

**ENLISTED PERSONNEL:**

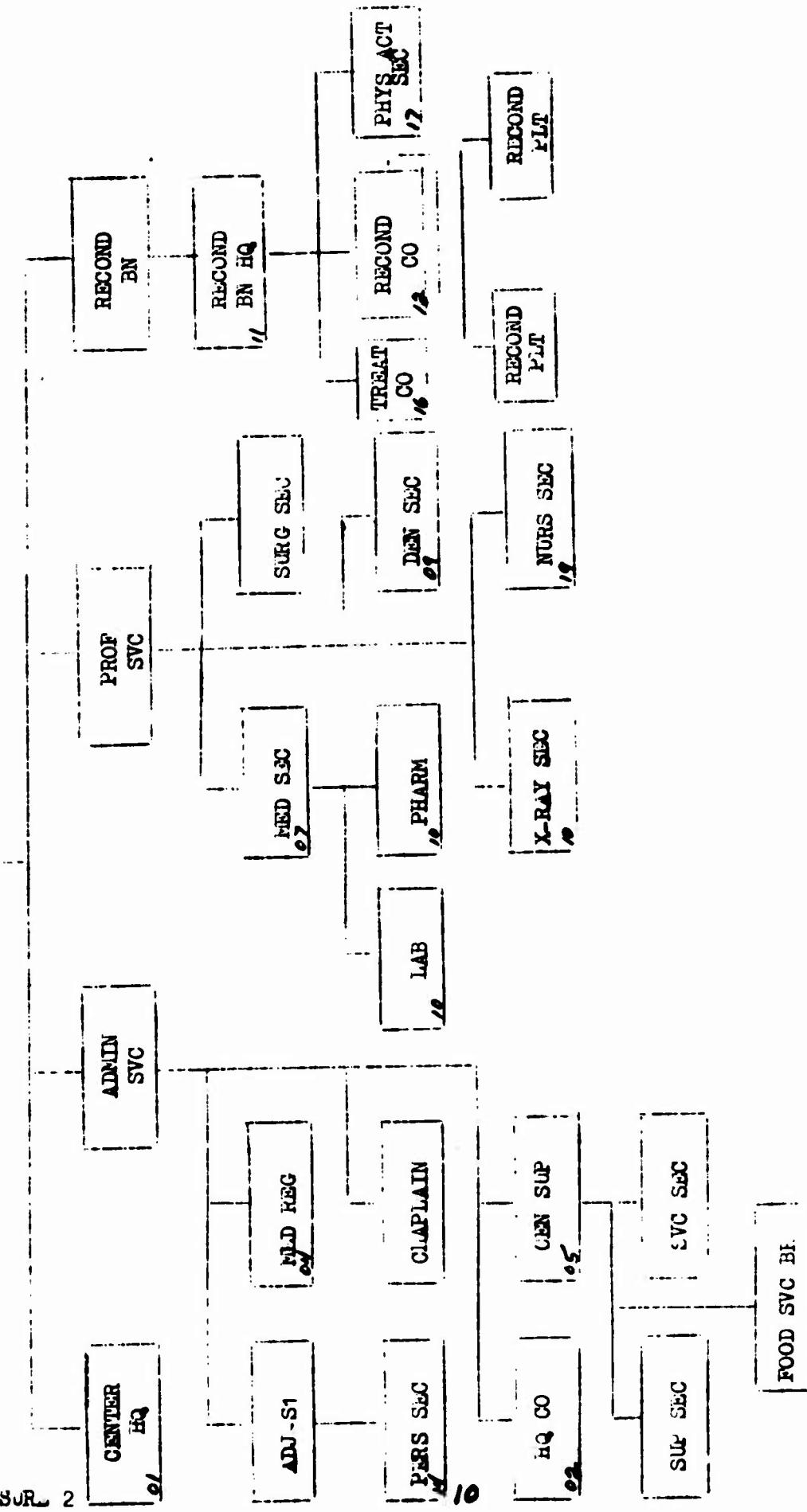
| <u>GRADE</u> | <u>MOS</u> | <u>AUTH</u> | <u>PRESENT</u> |
|--------------|------------|-------------|----------------|
| E-5          | 57A40      | 1           | 0              |
| E-6          | 76A40      | 4           | 2              |
| E-4          | 52F20      | 2           | 0              |
| E-4          | 63J20      | 1           | 0              |
| E-4          | 57E20      | 3           | 0              |
| E-4          | 52B20      | 1           | 0              |
| E-4          | 72B20      | 2           | 0              |
| E-3          | 43A10      | 1           | 0              |
| E-3          | 57A10      | 3           | 0              |
| E-3          | 63A10      | 1           | 0              |
| E-4          | 71A20      | 12          | 10             |

INCLOSURE 1

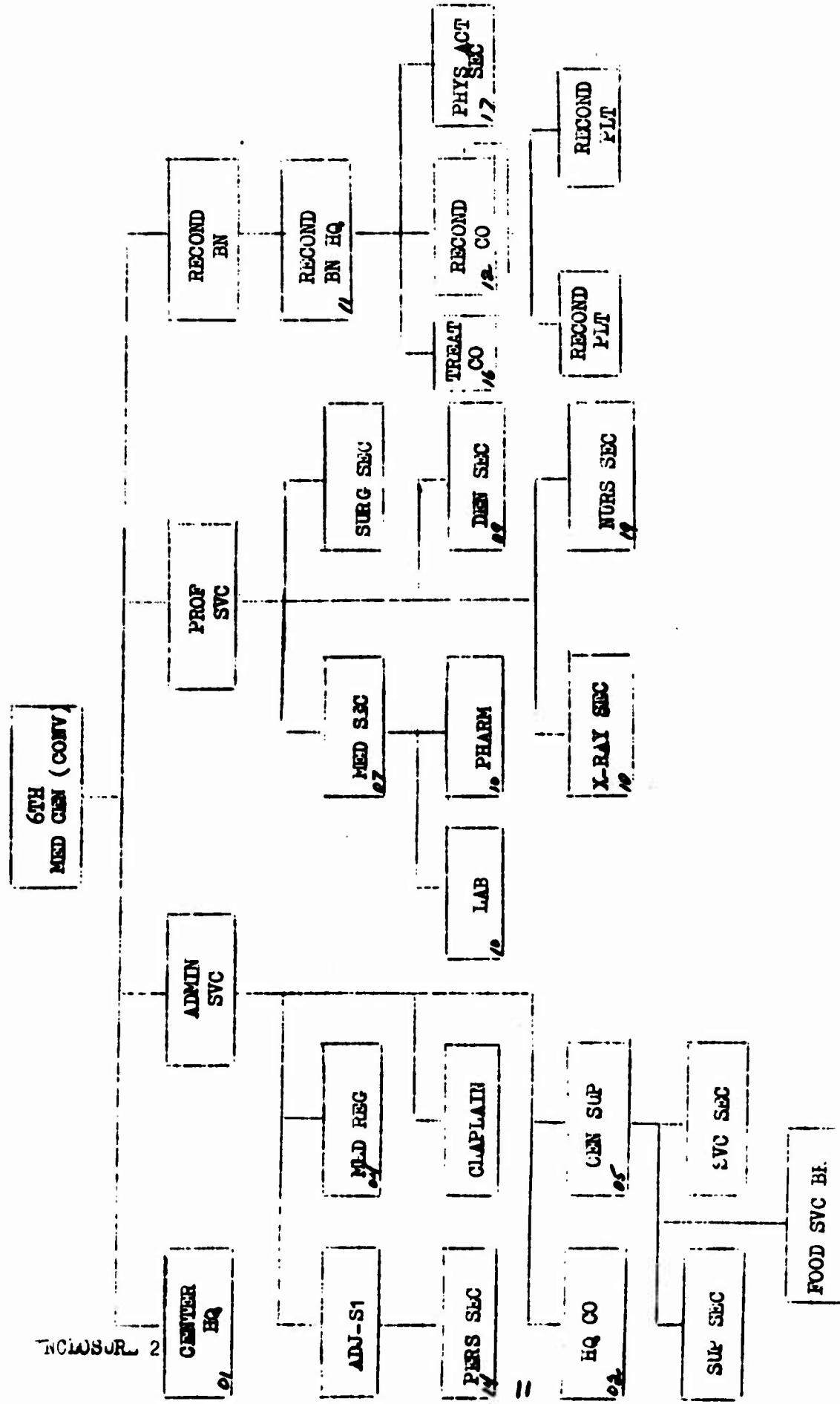
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ENCLOSURE 2

65TH  
MED GEN (CONV)



NOTE: Revised Organization Chart of 6th Medical Center (Conv) according to Functional Areas



NOTE: Revised Organization Chart of 6th Medical Center (Conv) according to functional areas

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**A & D REPORT**

a. Direct 97  
b. Transfer 2574

### **Breakout of Admissions**

|    |         |      |
|----|---------|------|
| a. | Disease | 1947 |
| b. | Injury  | 208  |
| c. | IRRA    | 516  |

a. Duty 2028  
b. Transfer 290

III. AVERAGE LENGTH OF PATIENT STAY . . . . . 27 days

#### **IV. DISPENSARY VISITS**

ENCLOSURE 3

12

14

SURGICAL DATA SHEET  
(1 Feb 67 - 30 Apr 67)

TOTAL NUMBER INPATIENTS

February - 246  
March - 261  
April - 308

AVERAGE DAILY CENSUS

February - 112  
March - 125  
April - 206

TOTAL NUMBER CLINIC VISITS

February - Not available  
March - Not available  
April - 248

TOTAL NUMBER SURGICAL PROCEDURES

February - 39  
March - 57  
April - 33

TOTAL NUMBER CAST CHANGES

February - 79  
March - 64  
April - 45

INCLOSURE 4

13

19

RECREATIONAL ACTIVITIES  
(1 Feb 67 - 30 Apr 67)

Each month NCU Club Shows are presented to the patients. Approximately 6 shows per month come from this source so a total of 18 performances were given during this period. The balance of our live shows are sponsored by the USO in cooperation with Special Services. These account for about 1 show per month.

Movies are shown each night in the week with one exception. A total of 78 movies were shown during this time period.

Our new airconditioned Special Services Library opened on 17 April 1967 for limited taping sessions and magazine usage only. We have approximately 1,000 books but only 5 bookshelves. However our balance of bookshelves are expected very soon.

The Mars Station which we operate gets maximum usage and the reception is usually of good quality. It is hard to estimate the amount of calls per month, although a good percentage of the calls that are placed are completed.

A Red Cross Recreation Supervisor arrived in mid-March and has organized an initial program. We received word that 3 Red Cross Craft Specialists are to arrive soon and establish an Arts and Crafts program.

Our beach continues to be used at all possible times. Organized swim periods are provided for the patients during the day. Permanent party personnel utilize the beach after duty hours and on weekends. The gymnasium offers a variety of weights and apparatus to be used by the patients while working out. Combination basketball, tennis, and volleyball courts are used both day and night.

INCLUSION 5

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POST EXCHANGE ACTIVITIES  
(1 Feb 67 - 30 Apr 67)

During the months of February and March 1967, the Post Exchange operated in a converted ward building measuring 20' x 102'. The retailing area of the store measured 1600 square feet and yielded an average monthly sales figure of \$100,000.00. The office space and storage area of the building totaled 420 square feet. Additional storage area was provided by eleven conexes adjacent to the store.

The original plans of the 6th Medical Center included a 40' x 100' structure designed for use as the Post Exchange. This building became ready for occupancy late in March and stocking crews and painters went to work readying the store for customers. Opening day, 3 April, produced a total sales figure of \$12,800.00, the largest daily volume to date. The total retailing area of the new store measures 1960 square feet. This increase in floor space, coupled with more modern fixtures for display, allow for a great expansion in the variety and amount of items stocked. In addition, the storage area has been expanded to 1200 square feet, thus eliminating the need for outside, conex storage.

Monthly sales for the 6th Medical Center PA range from \$150,000.00 to \$200,000.00 varying in direct proportion to the availability of merchandise from the supporting supply depot. At the present time, the supply is frequently erratic and insufficient in some areas. In order to improve the existing system, the Cam Ranh Area Exchange is in the process of incorporating a Merchandise Unit Control operation in each of its six annexes. The 6th Medical Center PA was chosen as the first annex in the area to begin implementation of this new system.

Complementing its regular services, the new PA houses a modern, four chair barber shop and a tailor and alterations concession. These services were formerly located in a separate temporary building. Plans for a new snack bar, the first in the Cam Ranh area, to be run by the PA system, indicate a May opening in the Special Services building. Its operation from 1200 hours to 2100 hours daily should reduce the sale of food and drink items in the PA and the attendant littering and policing problems.

Inclosure 6

21

POSTAL OPERATIONS  
(1 Feb 67 - 30 Apr 67)

During this period mail operations were normal except during the Easter holidays when both incoming and outgoing mail increased greatly. On an average day 1200-1400 letters are processed as outgoing mail. And approximately 1000 letters are processed as incoming mail. Over and above this figures packages, newspapers, registered and insured mail must be processed.

The biggest problem is the redirecting of mail. The patient census fluctuates between 900-950. Patients are both admitted and discharged to duty daily. This creates a very heavy load of mail that must be redirected. Frequently mail is forwarded to a patient from his unit only to find that the patient has been discharged to duty. This necessitates forwarding the mail back to the man's unit.

Postal services are provided on three days a week by the 575th APU. This APU is permanently located at the 22nd Replacement Battalion but sends two men to our mailroom Tuesday, Thursday and Saturday for three hours each day. During this three hours they sell stamps, money orders and accept packages for mail.

On 1 May 1967 the postal operations for the 6th Medical Center will move into new facilities. These facilities will more than triple the present available space, thus increasing the efficiency of the overall operation.

ENCLOSURE 7